## United States District Court

for the

Eastern District of New York

| KAREN APARICIO,   |                                     |
|---|-------------------------------------|
| Plaintiff(s) V.   | ) ) Civil Action No. 24-cv-377(ARL) |
| PEDIATRIC DENTISTRY of SUFFOLK COUNTY II,<br>PLLC, CHRISTOS A. IOANNOU, DDS, and<br>MICHAEL IOANNOU, DDS, | )<br>)<br>)<br>)                    |
| Defendant(s)  | )                                   |

## **SUMMONS IN A CIVIL ACTION**

To: (Defendant's name and address) Christos A. Ioannou, DDS 3237 Route 112, Bldg. #6, 7B Medford, New York 11763

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Debra L. Wabnik, Esq. Stagg Wabnik Law Group LLP 401 Franklin Avenue, Suite 300 Garden City, New York 11530 516- 812-4550 dwabnik@staggwabnik.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 01/19/2024

BRENNA B. MAHONEY

CLERK OF COURT

Concetta Landow

Signature of Clerk or Deputy Clerk

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 24-cv-377(ARL)

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

|        |  | ume of individual and title, if a                            | ny)                                   |      |  |  |
|--------|--|--|---------------------------------------|------|--|--|
| was re | ceived by me on (date)   |  | ·                                     |      |  |  |
|        | ☐ I personally served the summons on the individual at (place)                         |  |                                       |      |  |  |
|        |  |  | on (date)                             | ; or |  |  |
|        | ☐ I left the summons at the individual's residence or usual place of abode with (name) |  |                                       |      |  |  |
|        |  | , a person of suitable age and discretion who resides there, |                                       |      |  |  |
|        | on (date), and mailed a copy to the individual's last known address; or                |  |                                       |      |  |  |
|        | ☐ I served the summons on (name of individual)   |  |                                       |      |  |  |
|        | designated by law to   | accept service of proces                                     | s on behalf of (name of organization) |      |  |  |
|        |  |  | on (date)                             | ; or |  |  |
|        | ☐ I returned the sum   | mons unexecuted because                                      | ee                                    | ; or |  |  |
|        | ☐ Other (specify):   |  |                                       |      |  |  |
|        | My fees are \$   | for travel and   | \$ for services, for a total o        | f\$  |  |  |
|        | I declare under penalty of perjury that this information is true.                      |  |                                       |      |  |  |
| Date:  |  | _  |                                       |      |  |  |
|        | Server's signature   |  |                                       |      |  |  |
|        |  | -  | Printed name and title                |      |  |  |
|        |  | -  | Server's address                      |      |  |  |

Additional information regarding attempted service, etc:

Print Save As... Reset